



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

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Greg Maurer  
Elmore Medical Center  
P.O. Box 1270  
Mountain Home, Idaho 83647

Provider #131311

Dear Mr. Maurer:

On **September 25, 2008**, a complaint survey was conducted at Elmore Medical Center. The complaint allegations, findings, and conclusions are as follows:

**Complaint #ID00003728**

**Allegation #1:** The hospital is dirty and unsanitary in places, especially the patient rooms.

**Findings:** Surveyors made an unannounced visit to the hospital on 9/25/08. During the complaint investigation, surveyors toured the entire facility, reviewed policies and procedures, and interviewed patients, nurses, aides, housekeepers, and administrative personnel.

1. On 9/25/08 at 9:30 AM, the Performance Improvement/Risk Management Director provided surveyors with a tour of the hospital. During the tour, surveyors viewed all of the areas of the hospital that did not interfere with patient privacy, including: empty patient rooms and bathrooms, the pre-operative area, the nursing station, empty areas of the Emergency Department, public restrooms, the laboratory, the phlebotomy area, the radiology waiting area, the ultrasound area, the dressing room, and the dining area. With the exception of one food stain observed under a table in the cafeteria dining room, all of the areas appeared generally clean and unsoiled.

## 2. Policies/Procedures and Forms

A. The hospital had multiple policies and procedures relating to maintaining a safe and sanitary environment. These policies and procedures addressed issues like changing of mop heads, appropriate storage and disposal of trash, cleaning of rooms, cleaning of bathrooms, and linen guidelines. They also included quality control check lists.

B. A form titled "Hospital Day Shift Job Duties" had a task list for Housekeeping staff to perform to maintain a clean hospital environment. The form had a place for staff to check off duties as they were completed. The Manager of Environmental Services showed surveyors examples of completed forms, showing the items checked off.

## 3. Patient Interviews

A. During an interview on 9/25/08 at 9:00 AM, a current patient explained that she thought her room was kept clean and she was happy with the care she had received.

B. During an interview on 9/25/08 at 10:05 AM, another current patient expressed satisfaction with the care she had been receiving during her hospitalization. She rated the hospital as an "A+."

## 4. Staff Interviews

A. During an interview on 9/25/08 at 9:50 AM, a housekeeper who was in the process of cleaning a patient room, explained that it was her job to clean patient rooms daily, including cleaning the bathroom, shower, toilet, dusting, wiping down the beds, mopping the floor. In addition, she stated that she responded to special requests if additional cleaning was required.

B. During an interview at 9/25/08 at 10:56 AM, the hospital's Operations Officer explained that she and the Environmental Services Manager toured the facility together monthly to check on the cleanliness of the facility and identify areas that needed additional attention. She explained that she carried a notebook during the tour and jotted down notes if she noticed anything she thought required additional attention. She further explained that she looked at windows and windowsills, under beds, on floors, at grates, etc. Upon request, she provided surveyors with her notebook. In reviewing her notes for May, June, and July of 2008, no in-patient rooms were identified as needing additional attention.

C. During an interview at 9/25/08 at 11:06 AM, the Manager of Environmental Services explained that the Housekeeping Department hours were 5 AM to 11 PM. If something required cleaning during the 6 hours that Housekeeping was closed, he explained that nursing staff would clean up messes to the best of their ability and if needed, Housekeeping would follow-up the next morning.

He explained that Housekeeping attended to patient rooms daily, and if necessary, several times a day. Daily chores included mopping the floor, cleaning the shower, toilet, and sink, restocking paper products, soap and providing new towels daily, and emptying the trash. Nursing staff changed linens.

He explained that although Housekeeping attended to all areas of the hospital, they responded to needs based on priority: 1) first priority was the operating room; 2) second priority was the Birthing Room; 3) third priority was the Emergency Department; 4) fourth priority was the patient rooms; 5) fifth priority was the staff offices. He further explained that, attending to a patient room became a first priority if a patient complained. They were especially responsive to spills or messes because of infection control.

D. During an interview on 9/25/08 at 12:09 PM, the Chief Nursing Officer (CNO) explained that during the night when Housekeeping was unavailable, the nurses aides and nurses cleaned up any messes needing attention.

E. During an interview on 9/25/08 at 2:15 PM, a certified nursing assistant (CNA) of 32 years, described Housekeeping as "responsive" to any concerns or complaints. She gave an example, describing a time when she noticed footprints on the floor immediately after Housekeeping had mopped the floor. She contacted Housekeeping to report what she saw. They responded right away to re-mop the floor. She stated that disinfectant wipes were available in the room and that patient care staff attended to minor messes using the wipes.

F. During an interview on 9/25/08 at 2:25 PM, an employee who worked as aide and a unit clerk, described Housekeeping as "outstanding." She described the floors as waxed and clean, and stated that Housekeeping was responsive to calls about spills. If the mess was minor, she stated that nursing staff or aides would clean it up themselves.

G. During an interview on 9/25/08 at 2:40 PM, an employee of 35 years who worked as a full-time RN, stated she thought Housekeeping was "very good." Housekeeping removed dirty linens right away. She rarely heard complaints from patients about cleanliness. Occasionally, clean blankets gave the appearance of clutter when piled up on a chair, but they were not dirty.

H. During an interview on 9/25/08 at 3:00 PM, a part-time licensed practical nurse (LPN) stated that the only time cleanliness was generally an issue was at night when Housekeeping was not available. She stated that nurses and nurses aides cleaned up messes to the best of their ability and then communicated with Housekeeping in the morning for any necessary follow-up.

Although the facility may have been unclean at the time of the complaint, there was a lack of evidence to support that the hospital was a dirty or unsanitary place.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

**Allegation #2:** There is a shortage of nursing staff and they are overworked.

Findings: Surveyors made an unannounced visit to the hospital on 9/25/08. During the complaint investigation, surveyors reviewed policies, procedures, and staffing patterns. Additionally, surveyors interviewed patients and staff, including nurses, aides, and administrative personnel.

1. A nursing policy and procedure, dated 11/06 titled "Scheduling and Staffing of Nursing Personnel - Acute Unit" addressed scheduling and staffing of nursing services personnel based on a core staffing pattern and adjusted as patient needs and volumes required.

In reviewing the staff schedules and patient census for May and June of 2008, it was determined that each shift met or exceeded the minimum requirements stated in the hospital's policies and procedures. Most day and night shifts had 3 registered nurses (RN's) and 1 licensed practical nurse (LPN), 2 nurses aides, and 2 unit clerks. On occasion, an "agency" nurse was added to the schedule if staffing was inadequate.

## 2. Patient Interviews

- A. During an interview on 9/25/08 at 9:00 AM, a current patient described staff as responsive to the call light. She thought the staffing was good and that she had been receiving good care.

- B. During an interview with a current patient at on 9/25/08 at 10:05 AM, the patient expressed satisfaction with the care she had been receiving. She rated the hospital as an "A+."

### 3. Staff Interviews

A. During an interview on 9/25/08 at 10:14 AM, the registered nurse (RN) charge nurse stated that there were 10 current patients in the hospital that day. She stated the staffing for the day was typical staffing and included 3 RN's, 1 licensed practical nurse (LPN), and 2 certified nursing assistants (CNAs). She explained that when the census increased to 17 or so, she would then call in an additional RN.

B. During an interview on 9/25/08 at 12:09 PM, the Chief Nursing Officer (CNO) explained that the hospital did not go below the staffing levels listed in the policy. However, they would sometimes go over the minimum staffing levels to attend to patients with a higher acuity level (requiring more intensive care).

C. During an interview on 9/25/08 at 2:15 PM, a CNA of 32 years, stated that she was "impressed with the staffing." She said she was able to get her work done, that staff worked well together, she could generally respond right away to call lights, and that patients were not neglected.

D. During an interview on 9/25/08 at 2:25 PM, an employee who worked as a CNA and a unit clerk (HUC), explained that she thought the staffing was generally good and that occasionally they had to call in additional staff to meet patient needs. She denied feeling overwhelmed by the workload and felt that she was generally able to respond quickly to patient call lights. The only time she felt like it was over-busy was when one staff went to lunch, but that was only for a half hour period.

E. During an interview on 9/25/08 at 2:40 PM, an RN of 35 years, stated that she felt the patient staffing was "very good." She explained that generally nurses had a caseload of one nurse to five patients and the nursing assistants each took half of the floor. She stated that when the census required additional staff, they could usually get one of the hospital nurses to work extra, and if not, they would call an agency nurse.

F. During an interview on 9/25/08 at 3:00 PM, a part-time LPN stated that she did not feel there was any problem with the staffing levels but that occasionally it was necessary to call in an agency nurse, especially on the night shift.

Although it may have appeared that nursing was short staffed and overworked, there was lack of evidence to substantiate that the hospital had a shortage of nursing staff.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

**Allegation # 3:** Hospital staff is unresponsive to patient needs and do not care.

Surveyors made an unannounced visit to the hospital on 9/25/08. During the complaint investigation, surveyors reviewed grievance files, policies, procedures, and one patient record. In addition, surveyors interviewed patients, nurses, and nursing assistants.

1. Patient Interviews

A. During a private interview on 9/25/08 at 9:00 AM, a current female patient described staff as responsive to the call light. She stated that she had been treated with respect and "they have been very good to me here." She denied having any complaints about the care she was receiving.

B. During a private interview on 9/25/08 at 10:05 AM, a current female patient expressed satisfaction with the care she had received. She described the nurses and nursing assistants as "very nice and very happy." She rated the hospital as an "A+."

2. Staff Interviews

A. During an interview on 9/25/08 at 2:15 PM, an employee who had worked as a certified nursing assistant (CNA) for 32 years, stated "patients get very good care here." Although, they can get busy, patient's call lights are responded to quickly and patients are not neglected.

B. During an interview on 9/25/08 at 2:25 PM, an employee who worked 6 years for the hospital as a CNA and/or unit clerk (HUC) explained that she saw staff as personable and accessible to patients. She thought most patients were very pleased with the care received and that staff provided more individualized care than the larger hospitals were able to provide.

C. During an interview on 9/25/08 at 2:40 PM, a full-time RN of 35 years stated she saw the staff as "caring." She further stated "some patients cry when they have to be transferred elsewhere. Patients get very good care here. I'm proud to work here."

D. During an interview on 9/25/08 at 3:00 PM, a part-time licensed practical nurse (LPN) stated that on rare occasions she heard patient complaints. More often, she heard expressions of appreciation from patients about the care received.

### 3. Grievances

A. A hospital policy, dated 6/07 titled "Performance Improvement Concern (PIC)," explained ways patients could offer complaints to the hospital, such as submitting comment cards, calling the complaint line, responding to a satisfaction survey, writing letters, making telephone calls, communicating via the website, etc. The policy also described the processes the hospital would take to investigate grievances.

B. Surveyors reviewed grievance logs for a 6 month period (March to September 2008). There were four documented grievances. In reviewing the grievances, it was determined the hospital followed their policies for investigating and resolving grievances.

C. One patient, an 81 year old female with diagnoses of backache, syncope, urinary tract infection, dehydration, was admitted on 5/05/08 and discharged on 5/15/08.

During an interview on 9/25/08 at 12:09 PM, the Chief Nursing Officer (CNO) explained that during the hospitalization, the patient had many complaints. The CNO stated that she listened and talked with the patient for extended periods of time on more than one occasion, and in cooperation with staff attempted to address the patient's concerns.

In June of 2008, the patient filed a formal grievance with the hospital. The handwritten complaint was 23 pages long and included approximately 38 complaints/concerns.

Hospital staff investigated the complaints and instituted corrective actions where deemed appropriate. For example, the patient had multiple concerns about interactions with one staff member that was an agency nurse. Although, the hospital was unable to validate the incidents, the hospital discontinued employment with the agency nurse to avoid further conflict with the patient. Additional actions were documented in the grievance record. All concerns were investigated. Some of the concerns required follow-up staff education. For example, when a staff member addressed the patient as "sweetie, honey," it was necessary to educate staff in appropriate forms of address to patients.

A letter, dated July 28, 2008 addressed by the hospital administrator to the patient invited the patient to attend the Performance Improvement Committee to present her concerns.

During an interview with on 9/25/08 at 12:09 PM, the Chief Nursing Officer, stated that the patient did not attend the meeting.

Although, incidents may have occurred, there is lack of evidence to substantiate the complaint that the hospital was unresponsive to patient needs and that staff did not care.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

As none of the complaints were substantiated, no response is necessary. Thank you for the courtesies and assistance extended to us during our visit.

Sincerely,

*Teresa Hamblin for Sylvia Creswell*

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